PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10050882

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			2.4		(COIU	(Column 2)		TYPE		OR	SMALL ENTITY	
FOR			NUMBER	FILED	AU INE	ED EVIDA		RATE	FEE	1	RATE	FEE
TOTAL CHARGEABLE CLAIMS			<u> </u>		NUME	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
			∞y mi	nus 20=	*	4		X\$ 9=		OR	X\$18=	72
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM P			L. L.					+140=		OR	+280=	
* If the difference in column 1 is			less than zero, enter "0" in column 2				•	TOTAL		OR	TOTAL	894
4	27/04 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)).	SMALL	ENTITY	OR	OTHER SMALL I	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* (Minus	- 2	24	= 0		X\$ 9=		OR	X\$\8=	
	Independent FIRST PRESE	NTATION OF M	Minus	PENDENT	CLAIM		łl	X42=		OR	X84=	
NO MONEY DUE							, [+140=		OR	+280=	
							A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	01:444	<u> </u>	11	X42=		OR	X84=	
	TINOT PRESE	MIAITON OF MC	JUIPLE DEF	ENDEN	CLAIM		ا ا	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Calum	am (1)	(Cal		DDIT, FEE		OR ,	ADDIT. FEE	
		CLAIMS		(Colun	EST	(Column 3)	lr		ADDI			4501
AMENDMENT C		REMAINING AFTER AMENDMENT	,	NUME PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=	lſ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		*]	X42=		ı	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						! -	+140=		OR		
* 10	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
}	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							TOTAL DDIT. FEE		on ,	TOTAL ADDIT. FEE	
1	he "Highest Nun	mber Previously Paid their Previously Paid	d For (Total or	o SPACE IS Independe	nt) is the	n 3, enter "3." highest numbe		_	ropriate box			